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36735 7590 01/05/2004

MOSER, PATTERSON & SHERIDAN, L.L.P.
 3040 POST OAK BOULEVARD, SUITE 1500
 HOUSTON, TX 77056-6582



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William B. Patterson (Depositor's name)
 William B. Patterson (Signature)
 5 April 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/726,796	11/30/2000	J. Eric Lauritzen	WEAT/0072	5691

TITLE OF INVENTION: APPARATUS FOR PREVENTING EROSION OF WELLBORE COMPONENTS AND METHOD OF FABRICATING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	04/05/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
POPOVICS, ROBERT J	1724	166-227000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Moser, Patterson & Sheridan, L.L.P.
 2
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Weatherford/Lamb, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Houston, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 10

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 00000175 200782 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

William B. Patterson 5 April 2004

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01 FC:1501 1330.00 DA
 02 FC:1504 300.00 DA
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